

CENTRAL INTELLIGENCE AGENCY

INFORMATION REPORT

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Public Medical Facilities in Tientsin

1. In early 1954 there were between 600 and 700 fully trained doctors in Tientsin holding a recognized degree. There were also approximately 2,000 herbalists. The number and quality of doctors was considered sufficient to replace the missionary doctors who had left China from Tientsin.
2. The Tientsin Health Bureau (5898/3932/1444), directed by the Ministry of Health in Peiping, was the organ executing public health work. It carried out administrative work and gave instructions to all government hospitals. This Bureau did not control private hospitals but had influence over them; it also gave directives to private doctors for public health services. There were four or five directors in the Bureau. The director in charge of administration was called YANG (2799) (fnu).
3. There were 18 government hospitals in Tientsin, as follows:
 - a. Tientsin Municipal General Hospital with 400 to 500 beds.
 - b. Tientsin Municipal Hospital Number One with over 200 beds.
 - c. Tientsin Municipal Hospital Number Two with over 200 beds.
 - d. Tientsin Municipal Hospital Number Three with over 200 beds.

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- e. Tientsin Municipal Hospital Number Four with over 200 beds.
- f. Infectious Diseases Hospital with 200 beds.
- g. Central Maternity Hospital with 300 beds.
- h. Children's Hospital with 150 beds.
- i. Mental Hospital, regarded as being badly organized.
- j. Number One T. B. Clinic with 100 to 200 beds.
- k. Number Two T. B. Clinic with 100 to 200 beds.
- l. China Textiles Hospital with 300 beds.
- m. The other six government hospitals (names not known) had accommodations varying from 30 to 150 beds.

Private Medical Facilities in Tientsin

- 4. There were five or six private hospitals in Tientsin. Details of only one of these hospitals is available, but it is thought that the others were organized on similar lines. The following are the organizational details of this private hospital:
 - a. A board of directors, comprising all doctors of the hospital with the superintendent presiding over meetings.
 - b. A superintendent who was a medical doctor.
 - c. A chief medical officer, a surgeon, in charge of the laboratory, teaching, and personnel.
 - d. An administrative office, comprising six sections as follows: equipment, nursing, dispensing, kitchen and servants, accounting, and maintenance.
 - e. A medical department consisting of one doctor of internal medicine and one doctor of both internal medicine and skin diseases.
 - f. A surgical department consisting of one surgeon for general surgery and urogenital organs, and one doctor for general surgery and tumors.
 - g. An obstetrics and gynecology department consisting of one specialist.
 - h. A pediatrics department consisting of one specialist.
 - i. An ophthalmology department consisting of one specialist.
 - j. An ear, nose, throat, and eye department consisting of one specialist.
 - k. A dentistry department consisting of one dentist, 12 dressers, and 5 or 6 nurses.
- 5. All doctors attached to this hospital worked part-time only. There were altogether 40 beds. There were 30 beds for first and second class patients, which were reversible, and 10 beds for third class patients. The hospital was maintained by patients' hospital fees. Doctors were not on a salary scale and their income depended on registration and operation fees. A medical doctor received about six million RMB a month on an average.

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6. Fees had been established as follows:

a. Residence fees, including bed, food, and facilities, as follows:

1. First class - 50,000 JMP a day for a single room.
2. Second Class - 35,000 JMP a day with two persons in a room.
3. Third class - 20,000 JMP a day with from five to six persons in a room.

b. Operation fees were as follows:

1. Major operation, for first and second class patients, 600,000 to 1,200,000 JMP; for third class 120,000 JMP, a price fixed by the government.
2. Medium operation, first class 500,000 to 800,000 JMP; second class 300,000 to 500,000 JMP; and third class 75,000 JMP, fixed by the government.
3. Minor operation, first and second classes 50,000 to 300,000 JMP; third class 30,000 JMP; fixed by the government.

c. This scale of fees compares with the following government hospital operations fees:

- | | |
|---------------------|-------------|
| 1. Major operation | 150,000 JMP |
| 2. Medium operation | 100,000 JMP |
| 3. Minor operation | 50,000 JMP |

General Medical Conditions

7. Most of the hospitals were known to be equipped with x-ray facilities and there were in addition, four therapeutic x-ray sets in Tientsin.¹ Also there were a number of Public Health Services in Tientsin, including several maternity and child welfare centers and three or four bath houses. The public appeared to welcome these public health facilities and were cooperative with the authorities. There were no V.D. prevention centers and prostitution had been abolished, officially, since 1951.
8. Inoculations against small pox, cholera, typhoid, paratyphoid 1 and 2, and plague were available to the public. These inoculations were given in hospitals and public health centers, and it was considered that a large majority of the population had been inoculated. Public reaction was favorable.
9. There were seven government owned ambulances, and cases were attended to promptly.
10. Most big factories had their own medical departments where workers were periodically examined by doctors and specialists. Medical treatment was carried out in these departments, but doctors could recommend patients to hospitals if necessary. On the whole, industrial health was considered to be good. Doctors were allowed to visit patients at home but this was an infrequent practice. Workers who had to stay in hospitals had their fees paid for them by their factories or organizations.
11. In early 1954 the following schools were known to be functioning:
 - a. Tientsin Medical School, founded in 1951. Two courses were given. The five-year course gave proper medical training and conferred an M.D. degree. The two-year course provided preliminary pre-medical training. In early 1954 there were about 400 students attending the five-year course, each year's class consisting of 80 to 100 students.

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- b. Hopei Medical School, formerly in Tientsin and moved to Paoting in 1953, provided a two-year course, giving shorter training in medicine, surgery, ear, nose, throat, and eye, and possibly dentistry, depending upon national requirements. Graduates were known as medical soldiers (I shih - 6829/1102).
 - c. Tientsin Nurses Training School, in Tientsin, gave two courses. The two-year course was for graduates of junior middle school and the four-year course was for graduates of senior medical school.
 - d. China Union Medical College in Peiping was discontinuing the medical course and concentrating on post-graduate teaching work.
 - e. Peita Medical School had a five-year course.
 - f. Tientsin Medical School had a five-year course.
 - g. Shanghai Medical School had a five-year course.
 - h. The former Lingnan Medical School in Canton had both a five-year and a two-year course.
 - i. Hsiang Ya Medical School had a course, duration not known.
12. In Tientsin there were no Russian medical teachers and very few Russian medical text books had been translated for use in training students. In the field of ophthalmology, there was a translation of a Russian text book which was used for training junior medical students, and another work was being translated.
13. Prior to the liberation an institute producing typhoid, paratyphoid, cholera, and anti-plague vaccines was in existence near Tientan in Peiping and it was thought that this institute was still functioning.
14. At least two pharmaceutical factories which existed in Shanghai before the liberation were still functioning. It was, however, not certain if they were actually producing drugs or importing medicines for re-processing. These factories were:
- a. Sine Drugs Manufacturers (0207/6146/5673/1681).
 - b. Chih Wei Drugs Manufacturers (5728/1218/5673/1681).
15. There have been few cases of typhoid and very few of cholera in Tientsin. In 1951, however, an outbreak of encephalitis was recorded. Because of the anti-fly and anti-mosquito movement, sponsored by the government, there have been very few cases of infectious diseases resulting from flies and mosquitoes.
16. Corneal transplantations occurred in the private hospital² about once a week. The methods and instruments used were Tudor Thomas' Method with round trephine, and Castroviejo's Square Graft. Before the operation, the patient's eyes were cleansed and after the operation the patient was kept in bed for two or three days before the bandages were changed. In general the Corneal Transplanting operation had been rather unsuccessful on account of lack of experience. Many doctors have only started on such operations since the liberation.³
17. Among the eye conditions arising from nutritional deficiencies, corneal ulcers were very frequent and comprised from 10 to 20 percent of eye cases treated in the private hospital. The treatment consisted of close attention to diet, Vitamin A concentrate, intra-muscular injections for serious cases, penicillin, and cauterizing with heat.³
18. Cases of Keratomalacia were not very common and only four to five cases were treated in an average year in the private hospital.² Sarcoma of choroid was treated by means of enucleation of the eyeball. There were very few cases of

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operations to rectify detachment of the retina, an average of about five a year; the technique used was Sofar's Diathermy Coagulation method.


19. Orthoptic treatment was not usually given for rectification of squints because it was considered too time-consuming. Tension in glaucoma was brought down, prior to operation, by using pilocarpine (a two percent solution). If this drug was ineffective, an operation was indicated.³ There were about 30 to 40 cases a year in the private hospital² and about 80 percent of these were successful.
20. Most of the drugs were supplied from the U.S. and were obtainable in the open market with the exception of terramycine. Russian drugs were seldom seen in the private hospital. In early 1954 it was thought that penicillin was being produced in China.
21. There was a government sponsored blood bank in the Tientsin Municipal General Hospital and blood banks were known to exist in Peiping. People had to pay for blood transfusions.

1.  Comment. It is considered doubtful that there are four therapeutic x-ray sets in Tientsin.

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2.  Comment. The private hospital referred to is the hospital described in paragraph four of this report.

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3.  Comment. It is most unlikely that corneal grafts were performed as frequently as once a week. Otherwise the treatments mentioned are those standardly advised in any text book on ophthalmology.

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